



The CLL Bloodline

September 2016

QUIZ:

Choose the correct statement below:

1. CLL most commonly presents in men and in the elderly (over 70).
2. CLL has two peak incidences: a smaller peak at age 23 and a largest one at age 72.
3. CLL is most common in men in their 50s and 60s.
4. CLL affects men and women equally.

The correct answer is #1. CLL is slightly more common in men and the average age at time of diagnosis is 72. It is quite rare but possible for those under 30.

THE BASICS: Treatment Choices

In our last two **CLL Bloodlines**, we covered what needs to be done when first diagnosed, before treatment and how to know when treatment is needed.

This issue we broadly discuss frontline treatment choices.

Treatment decision should always be individualized and depends on several factors including:

- Your age, your overall health, and any co-morbidities
- Your prognostic factors (FISH and mutation status)
- Your personal preference

Your choices are complicated and there may be significant disagreement between different well-meaning experts, making it even harder to make a decision.

The approved frontline treatment choices broadly fall into three categories with significant overlap: 1: Chemo-immunotherapy or CIT including FCR and BR, 2: ibrutinib, and 3: clinical trials. All these options are discussed in detail in the treatment and clinical trial sections of our website, CLLSociety.org.

ACRONYM OF THE MONTH:

MRD stands for minimal residual disease. When our CLL is no longer detectable by imaging of the nodes and other organs and by routine blood and bone marrow tests, we are said to be in complete remission (CR), but there can still be a tiny amount of hidden disease. Using very precise testing, we can then search for as few as one cancer cell (or even less) in a 100,000. If nothing is still found we are said to be MRD negative and that is very good news.